

PCT

FEE CALCULATION SHEET

Annex to the Request

For receiving Office use only

PCT/US 99/25021
International application No.

(27.10.99)

27 OCT 1999

Date stamp of the receiving Office

Applicant's or agent's
file reference

PF-0625 PCT

Applicant
INCYTE PHARMACEUTICALS, INC.

CALCULATION OF PRESCRIBED FEES

1. TRANSMITTAL FEE

240.00 T

240

2. SEARCH FEE

1,002.00 S

1,002

International search to be carried out by ISA/EP

(If two or more International Searching Authorities are competent in relation to the international application, indicate the name of the Authority which is chosen to carry out the international search.)

3. INTERNATIONAL FEE

Basic Fee

The international application contains 85 sheets.

first 30 sheets

455.00 b₁

455

55

x \$10.00

=

550.00 b₂

550

remaining sheets additional amount

Add amounts entered at b₁ and b₂ and enter total at B

1,005.00 B

1,005

Designation Fees

The international application contains all designations.

10

x

105.00

=

1,050.00 D

1,050

number of designation fees amount of designation fee payable (maximum 10)

Add amounts entered at B and D and enter total at I

2,055.00 I

2,055

(Applicants from certain States are entitled to a reduction of 75% of the international fee. Where the applicant is (or all applicants are) so entitled, the total to be entered at I is 25% of the sum of the amounts entered at B and D)

4. FEE FOR PRIORITY DOCUMENT (if applicable)

15.00 P

15

5. TOTAL FEES PAYABLE

Add amounts entered at T, S, I and P, and enter total in the TOTAL box

3,312.00

3,312

TOTAL

☐ The designation fees are not paid at this time.

MODE OF PAYMENT

☒ authorization to charge
deposit account (see below)

☐ bank draft

☐ coupons

☐ cheque

☐ cash

☐ other (specify):

☐ postal money order

☐ revenue stamps

DEPOSIT ACCOUNT AUTHORIZATION (this mode of payment may not be available at all receiving Offices)

The RO/ US ☒ is hereby authorized to charge the total fees indicated above to my deposit account.

☒ (this check-box may be marked only if the conditions for deposit accounts of the receiving Office so permit) is hereby authorized to charge any deficiency or credit any overpayment in the total fees indicated above to my deposit account.

☒ is hereby authorized to charge the fee for preparation and transmittal of the priority document to the International Bureau of WIPO to my deposit account.

09-0108

27 Oct ber 1999

Deposit Account Number

Date (day/month/year)

Signature